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PTO/SB/21 (09-04)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/626,308
Filing Date	July 23, 2003
First Named Inventor	Berkman
Art Unit	2632
Examiner Name	Crosland
Attorney Docket Number	CRNT-0150

Total Number of Pages in This Submission

25

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	Check for \$240 (\$60 for Extension and \$180 for IDS)	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	1449 Form	
	References (2)	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Manelli Denison & Selter PLLC		
Signature	<i>Melvin L. Barnes, Jr.</i>		
Printed name	Melvin L. Barnes, Jr.		
Date	November 3, 2005	Reg. No.	38,375


CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name		Date	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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REPLY/AMENDMENT FEE TRANSMITTAL 	Attorney Docket No.	CRNT-0150	
	Application Number	10/626,308	
	Filing Date	July 23, 2003	
	First Named Inventor	Berkman	
	Group Art Unit	2632	
AMOUNT ENCLOSED	\$60	Examiner Name	Donnie Crosland

FEE CALCULATION (fees effective 01/01/05)

CLAIMS AS AMENDED	Claims Remaining After Amendment	Highest Number Previously Paid For	Number Extra	Rate	Calculations
TOTAL CLAIMS	73 ⁽¹⁾	73 ⁽²⁾	0 ⁽³⁾	X \$18.00 =	\$ 0
INDEPENDENT CLAIMS	6 ⁽⁴⁾	6 ⁽⁵⁾	0 ⁽⁶⁾	X \$200.00 =	\$ 0

Since an Official Action set an original due date of October 16, 2005, petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$120); 2 months (\$450); 3 months (\$1020); 4 months (\$1590); 5 months (\$2160)):

\$120

If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$110)

\$

Total of above Calculations =

\$0

Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)

\$60

TOTAL FEES DUE =

\$0

- (1) If entry (1) is less than entry (2), entry (3) is "0".
 (2) If entry (2) is less than 20, change entry (2) to "20".
 (4) If entry (4) is less than entry (5), entry (6) is "0".
 (5) If entry (5) is less than 3, change entry (5) to "3".

METHOD OF PAYMENT

☒ Check enclosed as payment.

☐ Charge "TOTAL FEES DUE" to the Deposit Account No., below.

AUTHORIZATION

☒ If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees under 37 CFR 1.16 or 1.17 necessary to maintain pendency of the present application to:

Deposit Account No.

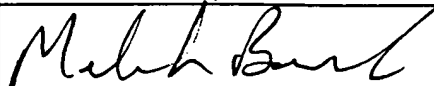
50-0687

under order No CRNT-0150

Deposit Account Name

Manelli Denison &
Selter

SUBMITTED BY: -- CUSTOMER NO. 20736

Typed Name	Melvin L. Barnes, Jr.	Reg. No.	38,375
Signature		Date	November 3, 2005